



NYHEADS. PATENT AND TRADEMARK OFFICE

Application No.:	10/617,477)
Filing Date:	July 11, 2003)
Inventor(s): Steve	n Roy Lipscomb)
Group Art Unit:	3712)
Examiner Name:	Collins, Delores R.)
Customer No.:	27160)
Title: Game Table w System	vith Integral Lighting))

Mail Stop Non-Fee Amendment Commissioner for Patents P. O. Box 1450 Alexandria, VA 22313-1450

AMENDMENT TRANSMITTAL

Sir:

Transmitted herewith is an amendment/reply in the above-identified application.

- 1. () A paper requesting correction/substitution of drawings is attached.
- 2. Fee for Claims
 - (X) No additional fee is required.

The fee for additional claims in accordance with 37 C.F.R. §1.16(b)-(d) has been calculated as shown below:

				SMALL ENTITY		OTHER THAN A SMALL ENTITY		
	Claims Remaining After Amendment			Present Extra	Rate	Additional Fee	Rate	Additional Fee
Total	13	Minus	20	0	x 9	0	x 18	
Indep.	1	Minus	3	0	X 43	0	x 86	

Fee for Multiple Dependent Claims	+145	0	+290	
	TOTAL ADDITIONAL FEES		OR	

3. 1	Metho	od of Payment of Fees		
	()	Enclosed is our firm check in the amount of: \$		
	()	Charge \$ to Deposit Account No. 50-1214.		
4.	(X)	The Commissioner is hereby authorized to charge any additional fees which may be required in this application under 37 C.F.R. §§1.16-1.17 during its entire pendency, or credit any overpayment, to Deposit Account No. 50-1214. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 50-1214. This sheet is filed in duplicate.		
		Respectfully Submitted,		
	Augu (Date	By: John S. Paniaguas Registration No. 31,051		
		KATTEN MUCHIN ZAVIS ROSENMAN 525 West Monroe Street, Suite 1600 Chicago, Illinois 60661-3693 (Direct) Phone No. (312) 902-5312 (Direct) Fax No. (312) 577-4532		